PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000														
-		·		9/	7	04	48							
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMA		NTITY	OR		RTHAN		
Ľ	OTAL CLAIM	is				4 4		TE	FEE	7	RATE	FEE		
F	OR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FEE		٦,,	BASIC FEI			
ľ	OTAL CHARGI	EABLE CLAIMS	54/ m	54/ minus 20=		. 34		XS 9≈		1	You	1//		
IN	DEPENDENT	CLAIMS	7/	/ ⁻ / minus 3 =		· 4/				-IOA	 	Ć.12		
М	ULTIPLE DEPE	NDENT CLAIM	PRESENT	RESENT				X40=		OR	X80=	320		
* If the difference in column 1 is less than zero, enter "0" in column 2							+13			OR	+270=			
	CLAIMS AS AMENDED - PART II							AL		OR	TOTAL			
_	<u> </u>	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						ALL I	ENTITY	OR	OTHER SMALL			
AMENDMENT A	2	REMAINING AFTER AMENDMENT		NUME PREVIO	BER BUSLY	PRESENT EXTRA	RA	ſΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
ENO	Total Independent	1. 54	Minus	<u> S</u>	4	= 0	X\$:	9=		OR	X\$18=			
A		ENTATION OF M	Minus ULTIPLE DE	PENDENT	(CLAIM		X40	=		OR	X80=			
								;=		OR	+270=			
							ADDIT.	TAL EE		OR ,	TOTAL ADDIT, FEE			
	(Column 1) (Column 2) (Column 3)													
AMENDMENT B	:	REMAINING AFTER AMENDMENT	4	NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RAT	E -	ADDI- TIONAL FEE		RATE	ADDI-* TIONAL FEE		
	Total	. 34	Minus	<u>. 5</u>	,4	=	X\$ 9	_		OR	X\$18=	- L. L.		
	Independent FIRST PRESE	NTATION OF M	Minus ULTIPLE DEI	PENDENT (3 CLAIM	• 7	X40	=		OR	X80=			
					JEANN,		+135	=		OR	+270=	•		
								TAL EE		OR ,	TOTAL			
. 1	raga ya kanan ka	(Column 1)		(Colum		(Column 3)						•		
AMENOMENIC		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA	RATI		ADDI- IONAL		RATE	ADDI- TIONAL		
	Total	•	Minus	••		=	X\$ 9	+	FEE	-	V615	FEE		
	Independent	•	Minus	•••		=	X40:	╌╂		OR	X\$18=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	X80=			
. 11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	+270=			
!	the "Highest Nu	ADDIT. F	EE L		OR A	TOTAL ODIT, FEE								
	ne Highest Num	iber Previously Par	d For (Total o	Independen	I) is the	highest number	ound in the	appr	opriate box	in colu	mn 1,			

FORM PTO-875 (Rev 8/00)